## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	01	12/92	dila	
O.I.P.E. CLASSIFIER	7.7	-16;	4400	
FORMALITY REVIEW	M.M.	71620	8-71-00	
RESPONSE FORMALITY REVIEW			10 C/ OO_	

## **INDEX OF CLAIMS**

Rejected	N Non-elected
= Allowed	IInterference
<ul> <li>(Through numeral) Canceled</li> </ul>	A Appeal
÷ Restricted	O Objected

	÷	nestricted	0	Objected	
Claim	Date	Claim 3	Date	Claim	Date
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31		53		103	<del>-                                     </del>
4		54		104	
5		55		105	
6		56	<del></del>	106	<del></del>
8	<del>-                                     </del>	58		108	+++++++++++++++++++++++++++++++++++++++
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10		60		110	•
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16	<del>                                     </del>	66	<del>                                  </del>	116	++++++
17	<del>                                     </del>	67		117	
18		68		118	
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22 🗸		72	++++	122	╼┼╌┼╌┼╌┼╌┼╌┤┲
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24		75	<del>╎┤╎╸</del> ┼┼┤┤	125	3
26		76		126	
27		77		127	
28		78		128	<del>▗</del> ▎ <del>▗</del> ┆┆┆
29		79		129	<del>▗</del> <del>▎</del> <del>╏</del> ┩
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32)v		82		133	<del></del>
34		84	<del>-   -   -   -   -  </del>	134	
35		85		135	
36		86		136	
37		87		137	-+-+-+
38		88 ,	++++	138	<del>- - - - - -</del>  -
39		89	+++++-1	140	-+
40	<del></del>	90	<del>╎╎╏</del> ┼┼┼┤	141	
41 42	<del>                                      </del>	91 92	<del>╎╸┤╸┤╸</del> ┼╌┤	142	
43	<del></del>	93	<del>╎╎╸</del> ┼╌┼╌┼╌┤╌┤	143	
44	<del>-                                     </del>	94	<del>                                     </del>	144	
45	<del>-+++</del>	95		145	
46	<del>             </del>	96		146	<del></del>
47		97	<del>                                     </del>	147	
48		98	╁╌╁╌╂╌╂╼┦╼┦	148	
49		99	╀┼┼┼┼	149	
50 0		100	<u>i_l_l_l_l_</u>	<u>                                   </u>	

If more than 150 claims or 10 actions staple additional sheet here